Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

5074A-000060/EPA

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			66				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	SASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			66 mir	nus 20=	* 41	4/0		X\$ 9=		OR	X\$18=	828
INDEPENDENT CLAIMS			( minus 3 = * ?				ŀ	X42=		OR	X84=	300
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				}	,				d 54
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	+140=	-	OR	+280=	
								TOTAL		OR	TOTAL	711001
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SMALL ENTITY			OR	OTHER SMALL		
AMENDMENT A:		CLAIMS REMAINING AFTER AMENDMENT	=	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	-ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM			+140=		OR	+280=	0
							L	TOTAL	,	ΩD	TOTAL	
	(Column 1) (Column 2) (Column 3)							DDIT. FEE	<u> </u>		ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u> </u>	=		X42=		OR	X84=	
L	FIRST PRESE		JLTIPLE DEPENDENT CLAIM   S 445263					+140=		OR	+280=	
-	12235 445263						L	TOTAL		ΩD	TOTAL	
	· • •	Al	DDIT. FEE	1		ADDIT. FEE						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	SER USLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	,
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	* .
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OB	TOTAL ADDIT, FEE	
		nber Previously Pa					r foun	d in the app	ropriate box	c in co	lumn 1.	